## RECEIVED

## 2010 NOV -8 AM 9: 16

FEC MAIL CENTER

FEC FORM 1		STATEMENT OF ORGANIZATION		Office Use Only		
1. NAME OF COMMITTEE (in	n full)	(Check if nam is changed)		ple:If typing, type he lines.	12FE4M5	
The Truth	Squad				<u> </u>	
		DO D 20			<u> </u>	
ADDRESS (number a	ind street)	PO Box 39	9, , , ,			
(Check if address is changed)		Vass			NC	28394
			CITY		STATE	ZIP CODE
COMMITTEE'S E-MA	AIL ADDRES	S (Please provide only	one e-mail add	ress)		
Check if	address	mbohn@ncgrowers.org				
(Check if address is changed)			1		<u></u>	
COMMITTEE'S WEE	B PAGE ADDI	RESS (URL)				
(Check if is change						
2. DATE	7 27	2010				
3. FEC IDENTIFICATION NUMBER						
4. IS THIS STATE	MENT 🗵	NEW (N)	OR	AMENDED (A)		
I certify that I have	examined this	s Statement and to the	e best of my ki	nowledge and belief i	t is true, correct	t and complete.
Type or Print Name	of Treasurer	Mary Beth	Bohn			
Signature of Treasurer  Date  10 27 2010						
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.  ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.						
Office Use Only			1 1	For further information of Federal Election Commiss Foll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)

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5.			OMMITTEE  Committee:				
	(a)		This committee is a principal campaign committee. (Complete the candidate information below.)				
	(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Comp	lete the candidate			
			information below.)				
	Name of Candidate  Liliiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii						
	Cand Party	id <b>ate</b> Affiliatio	Office Sought: House Senate President	State			
	(0)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District			
	(c) Name	الاا of	This committee supports/opposes they the cartificate, and is NOT all authorized committee.				
	Cand	idate					
	Part	y Com	I <b>mittee:</b> (National, State	Democratic,			
	(d)			lepublican, etc.) Party.			
	Poli	tical A	ction Committee (PAC):				
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	ected organization is a:			
			Corporation Corporation w/o Capital Stock	Labor Organization			
			Membership Organization Trade Association	Cooperative			
			In addition, this committee is a Lobbyist/Registrant PAC.				
	(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate seg committee. (i.e., nonconnected committee)	regated fund or party			
			In addition, this committee is a Lebbyisl/Rogistrant PAC.				
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)				
	Join	t Fund	raising Representative:				
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political			
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political			
			•				
			mittees Participating in Joint Fundraiser				
		1.		12. N.J. <u>zedzen elem A</u> meelk en. 12. N.J. <del>zedzen elem A</del> meelk en.			
		2.	FEC ID number C				
		3.	FEC ID number C				
		4.	FEC ID number	mayamiganaganaganiga 			

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Write or Type Committee N		
The Truth Squ	ad	
	ed Organization, Affiliated Committee, Joint Fundraising Representative, or L	eadership PAC Sponsor
Mailing Address		
	CITY	
	CITY STATE	ZIP CODE
Relationship: Conne	octed Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
7. Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of the perso	n in possession of committee
Full Name Mar	y Beth Bohn	
Tun Namo	Po Box 399	
Mailing Address		
	Vass	28394
		<del></del>
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number [910]	[245[2969
8. Treasurer: List the name any designated agent (e.	and address (phone number optional) of the treasurer of the committee; and g., assistant treasurer).	I the name and address of
Full Name Mar	y Beth Bohn	
Mailing Address	Po Box 399	
	Vass NC STATE	28394   -
Title or Position	Telephone number 910	

## **Federal Election Commission** ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified **USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark Shipping Date Overnight Delivery Service (Specify): **Next Business Day Delivery** Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):

DATE PREPARED

(3/2005)